

Fever - Inter - Vol - 1

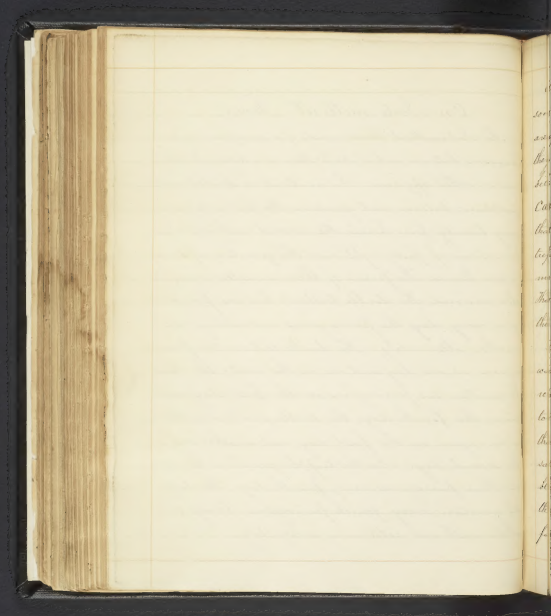
AN  
Inaugural Dissertation  
ON  
Intermittent Fever  
By  
James Young  
of  
Pennsylvania

Read March 10<sup>th</sup> 1823

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## On Intermittent Fever.

An Intermittent Fever consists of a succession of Paroxysms between each of which there is a distinct intermission called apyrexia. Intermittents are divided into quotidian, tertian, and quartan; the first returns every twenty four hours, the second with an intermission of forty eight, and the quartan of seventy two hours. The forms of these varieties are also various. The double tertian has one paroxysm every day the paroxysms resembling one another alternately; The double tertian two paroxysms, on one day and one on the next; the double quartan two paroxysms on the first day, and two on the fourth day; the double quartan with a paroxysm on the first day, and another on the second day. In the triple quartan there are three paroxysms every fourth day. The triple quartan every fourth paroxysm being alike with one returning every day.



When intermittents prevail in the Spring season they generally assume the tertian type and are of an inflammatory character; in the Autumn they assume the quartan form attended with bilious symptoms

**Causes.** It appears to be generally acknowledged that the Marsh miasmata arising from the putrefaction of vegetable matter is the most common causes of intermittent Fever. This observation was first made by Lancisi about the middle of the seventeenth century.

Intermittent fever is not a disease of very warm or very cold climates. Clark and others remark, that it rarely occurs near the equator. It is the opinion of Sir John Ringle that the effluvia arising from marshes of salt and fresh water united are more favorable to the production of intermittents than that of fresh water alone. Intemperance, great fatigue, wearing damp clothes, cold damp  
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atmosphere, increase of bile, grief, much anxiety, a watery, poor diet, the suppression of some long accustomed evacuation also produce it.

It has been believed that intermittents are communicated by contagion; this hypothesis however is not supported by experience. relapses frequently occur after the disease has been checked. A disordered state of the stomach and *prima via* is generally believed to be the proximate cause of intermittent fever.

**Symptoms.** The paroxysm of an intermittent fever is divided into three different stages, the cold, the hot, and the sweating. Upon the approach of the first, the face becomes pale and the skin constricted, a sense of debility, languor, frequent yawning, sluggishness and loss of appetite. The patient complains of being cold; the pulse is small, weak, and sometimes irregular, the respiration is disturbed and anxious; there is pain in the head, back, and extremities.

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extremities. Drowsiness seldom occurs, when it does it resembles apoplexy. The cold stage is partial in some cases, being confined to one or more of the extremities, while in other parts of the body considerable heat is felt, accompanied with cough and great dejection of spirits; the sight and hearing are often impaired. It has been remarked by Senac and Clegghorn that the cold stage is sometimes wanting, the hot occurring first.

In the hot stage, the face is flushed; the tongue is fixed, the skin is dry and hot with anxiety great pain in the head, throbbing of the temples, and an increase of sensibility; the pulse is hard, full and regular; the respiration frequent and more free than in the cold stage, and delirium not consequently comes on if the attack is violent. When hemorrhages occur, they generally come on in the hot stage; most generally the blood flows from the nose, sometimes from the lungs,  
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uterus, and rectum: When the system is in  
 a full plethoric state, they prove serviceable;  
 but on the contrary when it is much debilitated  
 they are always injurious. I must remark  
 that the hot stage is sometimes so slight as  
 scarcely to be perceived. After sometime the  
 symptoms of the hot stage gradually abate,  
 and a morbidness appears first on the forehead,  
 which gradually extends itself over the body in  
 the form of sweat; the respiration becomes more  
 free; the urine deposits a sediment; the thirst  
 and heat of the body abate; the pain in the  
 head and back disappears, and the patient  
 is left in a state of debility. These phenomena  
 generally attend a paroxysm of inter-  
 mittent fever; but this is not always the  
 case as they prevail to a greater or less  
 extent in different persons and in the  
 same persons at different periods.

**Prognosis.** In some cases the prostration  
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of strength is so great as to destroy <sup>the patient</sup> on the first attack? Dropsy is generally considered favourable; excessive debility of the natural functions indicates great danger. When intermittents have continued a length of time; they are sometimes converted into a remittent or continued fever, or lay the foundation of other diseases, as dropsy, &c. scirrhus of the liver or spleen. When the paroxysms are of long continuance, violent with much delirium or coma we expect a slow and difficult cure; but if the paroxysms are short and their return regular we may expect a speedy recovery. From convulsions and apoplexy, death sometimes takes place during the fever; but never in the sweating stage. When intermittents terminate fatally, death generally takes place in the cold stage.

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find inflammation<sup>n</sup> of the primæ viæ, in the spleen, liver, and many of the other viscera and in those who have died in the cold stage, accumulations of blood in the liver and spleen. The omentum, stomach, mesentery are not unfrequently found inflamed and sometimes sphacilated. The pancreas is sometimes enlarged and ulcerated. The brain is sometimes, though rarely inflamed.

*Treatment.* In the cold stage the patient is to be confined to bed, warm bricks or bottles filled with warm water are to be applied to the extremities, and warm diluent drinks to be freely administered, as sweet halm, or linseed tea. When this fails, we must have recourse to stimulents; the most proper are volatile alkali, tinctura opii from twenty drops to thirty drops, or sulphuric æther, given to the extent of a drachm, either of which may be repeated if necessary. Thus

Application





application of a lemniscate on the thigh and  
arm of opposite sides has sometimes succeed-  
ed in stopping the paragonia. When the case  
is obstinate it has been recommended to admin-  
ister from two to three grains of Opium, either  
alone or combined with a fourth of a grain  
of tartaric Antimony or two grains of  
oprocacumina two hours before the paragonia  
is expected. The intermittent fever has its  
seat in the stomach, much good is to be ex-  
pected from the administration of an emetic  
either before the commencement of the  
cold stage. By this means we are enabled to  
remove the morbid cause and consequently  
to prevent its return.

In the hot stage we may give an emetic  
of antimonial tartar, after the operation  
in which we may advise some diaphoretic  
medicines, as the antimonial powder, spir-  
its of mendereri and capiviensis. When

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there is much nausea the efferves-  
 ence of the neutral mixture may be  
 given. If the system refuses to react, the ex-  
 tremities cold and the pulse sinking, we  
 should immediately apply rubefacients with  
 the volatile alkali and opium enemata.

If the heat in the head is severe, respiration  
 laborious, the pulse full and strong, we  
 must bleed, vomit, and purge: but if these  
 symptoms are not relieved after waiting a reason-  
 able time a blister must be applied to the  
 nape, and cups or leeches to the temples: cold  
 drink is grateful and often serviceable in  
 the hot stage. When vomiting and purging  
 of bile spontaneously take place in this stage  
 detraints are necessary, but if they continue  
 to be severe, opiates must be administered.

Cases rarely occur in which medicine  
 is necessary in the sweating stage. When the  
 fever subsides we should commence as

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soon as possible with the Peruvian Bark, after the alimentary canal has been evacuated by emetics and purges, some sedation is sometimes necessary. Some stomachs are so irritable as to reject the bark, in such cases it may be combined with Virginia snake root, cloves, nutmeg, or other aromatics, some of which are supposed to increase its powers. If the bark should produce costiveness, a few grains of the bark may be added; but on the contrary if it occasions purging it may be checked by adding kino or opium. If costiveness should continue any length of time a gentle cathartic will be proper. When the stomach is irritable, the bark must be given by injection; and repeated every three or four hours to the extent of two or three drachms mixed with a miscilage of Gum Arabic and a few drops of linclera offic.

The red bark, when pure is decidedly the best. The *Natery*'s extract of Bark, which is pre-

pared



prepared by slow evaporation of the watery  
 infusion, may be given in the dose of ten or  
 fifteen grains every hour during the inter-  
 mission, either in pills or in solution, with  
 two or three drachms to ʒss of Lavender  
 comp. and ʒss of water. Of late this medicine  
 has been justly rated by some of the most dis-  
 tinguished practitioners of Philadelphia,  
 who speak of it in the highest terms. The bark  
 has been prescribed in a great variety of  
 forms, but of all these the powder is decided-  
 ly the best, when it agrees with the stomach.  
 One or two drachms may be given every  
 hour increasing the dose during the inter-  
 missions. It is sometimes used externally  
 in cases of hectic females and children, re-  
 milled in a wine, and applied round  
 the body. Dr. Rush says when the bark  
 fails after repeated trials moderate bleeding  
 will generally prove successful. Where there  
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is much inflammation or fever we must be cautious in the use of the bark: on the other hand if there is much debility and tendency to typhus, we must commence early with this medicine, and give it in as large doses as the stomach will bear. Saguinea or milt is said to be the best means of disguising the taste of this article. The use of the bark should be continued for ten or fifteen days after the disease has been removed. Quassia is used with advantage in the West Indies. A variety of Barks have been substituted for the Peruvian, as wild Cherry Tree (*Prunus Virginiana*) white Birch, black. Alder, Cheenut Bark, Coy Wood (*Cornus florida*), Angelica and Willow, all of which are very inferior to the Cinchona in its unadulterated state. Dr Wright has used the bark of the Mahogany Tree with considerable advantage. It is asserted



by C. T. Miller that an ounce of genuine  
Persicaria Bark given before the accession  
of the fevers soon will not only prevent it,  
but sometimes entirely remove the disease.

In the United States, the *Esopato* in  
*Esopato* has been used with considerable  
success, it acts as a tonic and diuretic, it  
may be given either in the fevers, or in  
apoplexy.

*Steno* has been employed in a variety  
in the following manner.

R. Gum *Steno* 3j.

Pale. *Gentian* 3ss.

Gum *Opia* 3ss. mixed and di-  
vided into twelve powders, one to be taken  
every two, three, or four hours. This is  
given in the dose of an drachm, and repeat-  
ed every two or three hours. Sulphur has  
been administered with success, in spiritual  
liquors, or in milk. In Intermittents the  
(Sulphate.



sulphate of copper is a valuable remedy, given to the extent of one fourth of a grain combined with two of Peruvian Bark repeated four times a day. Scirrhous enlargements of the spleen and liver sometimes takes place, when Intermitents have continued for a length of time, which may be removed by the use of Mercury, till the mouth is affected if it cannot be taken internally, it must be applied in the form of Ointment, rubbed into the groin. Dropsical swellings which often come on about the termination of the disease, may for the most part be removed by the use of Cream Tartar in small doses, frequently repeated.

The Saccharum saturni has been highly recommended by M<sup>r</sup>. Barlow, but is at present not much in repute. Not a little has been said of Arsenic in this disease, given in solution, as directed by  
(M<sup>r</sup>. Fowler)

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Dr. Fowler, it has proved successful in some obstinate cases of intermittent Fever, and is best adapted to the case of children and delicate women; the dose is from ten to twelve drops for an adult repeated three a day during the intermission. It proves more efficacious, when given in conjunction with the Peruvian bark.

The Tela Aranea or Spider's web, has been prescribed <sup>instead of opium</sup> with success by Professors Physick and Whapman in doses of five grains, repeated every four or five hours: that which is found in cellars and dark places is the best.

**Diet.** If an inflammatory diathesis exists we must recommend light food, as Panada, Pazo, Tapioca and Barley; but in patients of a weak habit, a contrary course must be pursued, wine and animal food may be taken.

*[Faint, illegible handwriting on lined paper, likely bleed-through from the reverse side.]*

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*Preventives.* The best preventives are a generous diet, comfortable clothing, the use of Bark, or infusion of Quassia once or twice a day, change of air, exercise in the open air, on horseback and in carriages, avoiding every thing that tends to debilitate.

1871  
The first of the year  
was a very dry one  
and the crops were  
very poor. The  
winter was also  
very dry and the  
crops were very  
poor.